Background

The Riverside County Health Services Agency (HSA) was created in 1991 to combine the Health Department, Riverside General Hospital, and Environmental Health. HSA was to provide direction, oversight, and administrative services for its entities. In 1998, Riverside General Hospital became the Riverside County Regional Medical Center (RCRMC). Detention Health Services (DHS) is under the umbrella of the RCRMC. DHS in the adult jails is the focus of this report.

Detention Health Services is “charged with administering healthcare in the Riverside County Detention Centers,” and as an extension of the RCRMC, “is committed to carrying out the Hospital mission in the jails and juvenile halls” (DHS Policy No. 100 dated 12-22-99). Including the locked unit at RCRMC, there are 11 adult and juvenile detention facilities in Riverside County organized into West County DHS, Mid County DHS, and East County DHS. These facilities are governed under the California State Board of Corrections Title 15, Guidelines for Minimum Standards in Local Detention Centers.

The mission statement of DHS mirrors that of RCRMC, and states “The mission, as it was adopted by the Board of Supervisors, reads as follows: Riverside County Regional Medical Center is committed to the health and well being of all those we serve regardless of their ability to pay, and without discrimination.” This also includes “Continuous improvement in the quality of care and service we provide” (Mission Statement, Detention Health Services, revised 12-22-99).

The prototype DHS emulated by the DHS in surrounding counties utilizes (a) Registered Nurses to do the initial health screening of all new inmates during the booking process, (b) a Patient Education Nurse who evaluates and meets the educational needs of inmates with existing medical problems, as well as those inmates who are diagnosed with new medical conditions, and teaches health related classes, (c) a Drug and Alcohol Counselor, (d) a Social Worker and (e) a Public Health Nurse. These positions all contribute to a goal of the Riverside County Sheriff’s Department, “… to provide incarcerated adults humane treatment and programs aimed at reintegration into society” (Smith, Larry D., Sheriff, June, 2000, p.3, Basics Facts Summary).
Findings

1. Riverside County detention facilities do not utilize the DHS staff for the initial health screening of new inmates. The sheriff’s correctional staff completes a medical questionnaire and refers positive responses or obvious medical needs to DHS. A number of medical conditions that require nursing or physician attention may not be recognized. Bookings occur 24 hours a day and there were 44,562 bookings in 1999. (Smith, June, 2000)

2. The nursing staff of Detention Health Services is currently made up of approximately 80% Registered Nurses (RN) and 20% Licensed Vocational Nurses (LVN).

3. Each area nursing supervisor is responsible for three different DHS units. When an RN is not available, the area supervising RN must fill that position, and this takes him/her away from his/her supervising responsibilities.

4. Currently there is not an on-call roster of RNs with security clearance to be used as substitute personnel at detention facilities.

5. California Penal Code 4025 reads in part “(e) The money and property deposited in the inmate welfare fund shall be expended by the sheriff primarily for the benefit, education, and welfare of the inmates confined within the jail. Any funds that are not needed for the welfare of the inmates may be expended for the maintenance of county jail facilities. Maintenance of county jail facilities may include, but is not limited to, the salary and benefits of personnel used in the programs to benefit the inmates, including, but not limited to, education, drug and alcohol treatment, welfare, library, accounting, and other programs deemed appropriate by the sheriff. An itemized report of these expenditures shall be submitted annually to the board of supervisors.”

6. The Inmate Welfare Fund (IWF) is not being utilized as a source to hire needed DHS personnel.

7. DHS is lacking a Nurse Educator, Drug and Alcohol Counselor, Social Worker, and a Public Health Nurse.

8. X-rays taken at the RCRMC are filmless and paperless. Lacking a digitizing machine, x-ray films taken at detention centers must be transported to RCRMC for reading and digitizing. There are occasions when an x-ray is held and then sent over with those taken the following day for reading. Onsite digitizing
would facilitate the reading of the x-rays and treatment of the patient.

9. DHS has only one Portable Digital Monitoring with Pulse Oxymeter machine at Robert Presley Detention Center. This unit is used for checking vital signs and oxygen concentration in blood. It is essential for monitoring asthmatics and inmates complaining of respiratory difficulties to ascertain if he/she has a medical problem or is malingering.

10. The Jail Information Management System (JIMS) is the computer software used in detention facilities. This is a secure system for inmate information and DHS staff has use of only a limited section. Confidential medical information, i.e., medical records, are not in the system so hard copies must be maintained and physically transferred with the individual inmate. During transfer, records are sometimes misplaced or misdirected.

11. There is a lack of computer terminals at some nursing stations.

**Recommendations**

Riverside County Board of Supervisors  
Riverside County Health Services Agency  
Riverside County Regional Medical Center  
Detention Health Services  
Riverside County Sheriff

1. Provide funds for and hire 15 RNs to be utilized for the initial health screening of new inmates at Robert Presley, Southwest and Indio detention facilities on a 24 hour 7 day a week basis.

2. Allocate funds from the IWF to hire a Nurse Educator, Drug and Alcohol Counselor, Social Worker, and Public Health Nurse.

3. Develop an on-call roster of RNs, with security clearance, to cover illness and vacations of the nursing staff within DHS.

4. Purchase two x-ray digitizing machines and five Portable Digital Monitoring with Pulse Oxymeter machines.
5. Program a secure medical records system for DHS staff use within the JIMS.

6. Provide a computer terminal at all DHS nursing stations.